

Perm	it #
Date_	
SBL ]	

## **APPLICATION FOR BUILDING AND ZONING PERMIT**

Fee: \$ Cash: C	heck #:			
Owner:	Phone #:			
Property Address:	Mailing Ac	ddress:		
Contractor:	Phone #:			
Address:				
***A copy of the survey MUST accom				
Dimensions of Proposed:				
Shed: Heightft. Fr	ontageft.	Depth	ft.	
Swimming Pool: Size Above Ground Ingrou	DepthFondFond	ence mounted on laced under power li	pool yes ines, must be fenced	no 1 & alarm required)
Fence: Type	Height _		_ft	
Sign: Size	Construction Mate	erial		
Other:				
Construction will be located in the				
Estimated Cost \$	Start Date	En	d Date	
Date	Code Enforcement Off	icer		
Clerk	Mayor _			

Suitable drawing giving complete construction details must accompany this application. If application is for an addition to main building or erection of any accessory building, additional required information must be supplied by filling specifications on other side of this form.

The Village of Akron should be Additional Insured on a Primary & Non-Contributory Basis with a Waiver of Subrogation in favor of the Village of Akron

Fax Number: 716-542-5586 codeenforcement@akronvillage.us

		sory building nees from all buildings to lot line	es
Floating Slab Thickness		Footers	
Floating Slab Thickness		FootersSill Plates	
Foundations Include thickness			
FoundationsInclude thickness		Sill Plates	
Foundations Include thickness  Floor Joists  Sub-Floor Include thickness		Sill PlatesWall Plates	
Foundations Include thickness Floor Joists Sub-Floor Include thickness Studs	O.C	Sill PlatesWall PlatesWall Plates	O.C

\*\*\*A copy of the survey MUST accompany this application and include the following:

1. All dimensions of lot lines

amount not to exceed \$50.00.

\*\*\*All permits are granted subject to rules issued by NYS Department of State 2020 ICC Building Codes.

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